

U.S. Department
of TransportationNational Highway
Traffic Safety
Administration

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire (VOQ)

NATIONWIDE 1-888-DASH-2-DOT

1-888-327-4236

www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 255

Date Received

02-MAR-2000

 Od_or _____
 Rt_dt _____
 od_rt _____
 up_ltr _____

Reference No.

857801

 Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? ☐ YES ☐ NO
 In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.

Signature of Owner _____ Date ____/____/____

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) _____ (located at front of windshield on driver's side)	Vehicle Make DODGE	Vehicle Model SHADOW	Vehicle Year 1994	Current Odometer Reading
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Purchase Date	Dealer's Name _____	Engine Size (CID/CC/L) _____	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection
☐ New ☒ Used	City _____ State _____ Zip Code _____	No Cylinders _____	

Transmission Type ☐ Manual ☐ Automatic	Antilock Brakes ☐ Yes ☒ No	Restraint System ☐ 3-Point Belt ☐ Motorbell ☐ Driverside Airbag ☐ 2-Point Belt ☐ Passengerside Airbag	Cruise Control ☐ Yes ☒ No	Drive Train ☐ Front ☐ Rear ☐ 4-Wheel	Vehicle Type ☐ Car ☐ Sport Ult ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____	Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____
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FAILED COMPONENT(S)/PART(S) INFORMATION

Component 09306000 09305000	Part Name(s) LIGHTING:FUSE: BRAKE LIGHTS LIGHTING:FUSE: TAIL LIGHTS	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failures 2	Date(s) of Failure(s) _____ Mileage at Failure(s) _____ Vehicle Speed at Failure(s) _____	Failed Part(s) Available? ☐ Yes ☐ No	NHTSA Previously Contacted? ☐ Yes ☐ No

APPLICATION INCIDENT INFORMATION

(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies) on the back of this form)

Crash ☐ Yes ☒ No	Fire ☐ Yes ☒ No	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

DRIVER'S SIDE REAR BRAKE LIGHTS AND TAIL LIGHTS WERE OUT DUE TO A BAD WIRE HARNESS. THE HARNESS HAS BEEN REPLACED TWICE. DEALER HAS BEEN CONTACTED. *AK

CONTINUED ON BACK (REVERSE)

The Privacy Act of 1974-Public Law 93-579 This information is requested pursuant to authority vested in the National Highway Traffic Safety Act and subsequent amendments. You are under no obligation to respond to this questionnaire. Your response may be used to assist the NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If the NHTSA proceeds with administrative enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.

 DOT Auto Safety Hotline Vehicle Owner's Questionnaire (VOQ) U.S. Department of Transportation National Highway Traffic Safety Administration NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 255 Date Received: <u>02-MAR-2010</u> RECEIVED OFFICE OF SAFETY INVESTIGATION Od_or _____ Rt_dt _____ Od_rt _____ Sup_itr _____ Reference No. <u>657801</u> Work Number _____ Home Number _____	
OWNER INFORMATION (Type or Print) 593380			
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? ☐ YES ☐ NO In the absence of an authorization, NHTSA <u>WILL NOT</u> provide your name and address to the vehicle manufacturer. Signature of Owner _____ Date <u>3/11/10</u>			
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) <u>1B3AP68KXRN249628</u>		Vehicle Make <u>DODGE</u>	Vehicle Model <u>SHADOW</u>
Vehicle Year <u>1994</u>		Current Odometer Reading _____	
Purchase Date <u>MAR 1994</u>	Dealer's Name <u>STERLING HTS. Dodge</u>		Engine Size (CID/CC/L) _____ No Cylinders _____
☒ New ☐ Used	City <u>STERLING HTS.</u> State <u>M.C.H.</u> Zip Code _____		☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection
Transmission Type ☐ Manual ☒ Automatic	Antilock Brakes ☐ Yes ☒ No	Restraint System ☐ 3-Point Belt ☒ Driverside Airbag ☐ Motorbelt ☐ 2-Point Belt ☐ Passengerside Airbag	Cruise Control ☐ Yes ☒ No
Drive Train ☒ Front ☐ Rear ☐ 4-Wheel	Vehicle Type ☒ Car ☐ Van ☐ Minivan ☐ Other		Body Style ☐ 2-Door ☒ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component <u>09386000</u> <u>09308000</u>	Part Name(s) <u>LIGHTING:FUSE:BRAKE LIGHTS</u> <u>LIGHTING:FUSE:TAIL LIGHTS</u> <u>Wiring HARNESS</u> <u>For Left Rear Brake Light</u>		Location ☒ Left ☐ Right ☐ Front ☐ Rear
Failed Part(s) ☒ Original ☐ Replacement	No of Failures <u>2</u>		
Date(s) of Failure(s) <u>1997 - 1998</u>		Mileage at Failure(s) <u>Approx 34,000</u> <u>Approx 48,000</u>	
Vehicle Speed at Failure(s) <u>N/A</u>		Failed Part(s) Available? ☒ Yes ☐ No	
NHTSA Previously Contacted? ☐ Yes ☒ No		1 2ND TIME	
APPLICATION INCIDENT INFORMATION			
(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies) on the back of this form)			
Crash ☐ Yes ☒ No	Fire ☐ Yes ☒ No	Number of Persons Injured _____	Number of Fatalities _____
Estimated Property Damage _____		Reported to Police ☐ Yes ☒ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
DRIVER'S SIDE REAR BRAKE LIGHTS AND TAIL LIGHTS WERE OUT DUE TO A BAD WIRE HARNESS. THE HARNESS HAS BEEN REPLACED TWICE. DEALER HAS BEEN CONTACTED. *AK			
CONTINUE ON BACK IF NEEDED			
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